

2600 Maitland Center Pkwy.

Suite 300

Maitland, FL 32751

P.O. Drawer 200

Winter Park, FL

32790-0200

Tel: 407-740-8575

Fax: 407-740-0613

www.tminc.com

SD PUC E-File

South Dakota Public Utilities Commission

Http://www.puc.sd.gov/,

RE:

Budget PrePay, Inc. d/b/a Budget Mobile

SD Copy of FCC Form 481 - Carrier Annual Reporting

Docket No. TC12-125

Dear Sir or Madam:

Enclosed please find the SD Copy of FCC Form 481 - Carrier Annual Reporting, filed on behalf of Budget PrePay, Inc. d/b/a Budget Mobile. No check is enclosed as there are no remittance fees due.

This report has been web-filed at www.puc.sd.gov/.

Questions regarding this filing should be directed to my attention at 407-740-8575. Thank you for your assistance in this matter.

Sincerely,

Craig Neeld

Compliance Reporting Specialist

cc:

Lakisha Taylor - Budget PrePay, Inc. d/b/a Budget Mobile

file:

Budget PrePay, Inc. d/b/a Budget Mobile - Reporting - South Dakota

CN/jg

FCC Fo	rm 481 - Carrier Annual Reporting Data Collection Form		79621 - 0, 1 0 - 00	FCC Form 481 OMB Control No. 3060-0 July 2013	986/OMB Control	No. 3060-0819
<010>	Study Area Code	399021	and the state of			0.00
<015>	Study Area Name	Budget PrePay	Inc.			
<020>	Program Year	2015				
<030>	Contact Name: Person USAC should contact with questions about this data	Lakisha Taylor	Heli All			
<035>	Contact Telephone Number: Number of the person identified in data line <030>	3186715000 ext				
<039>	Contact Email Address: Email of the person identified in data line <030>	lakishat@budget	prepay.com		10)	1011
	4.00		177 (1871)		54.313	54.422
ANNILA	AL REPORTING FOR ALL CARRIERS			1 7	Completion Required	Completion Required
ANNOP	E REPORTING FOR ALL CARRIERS			> stayed	(check box whe	
<100>	Service Quality Improvement Reporting		(complete attached work	ksheet)		HILL
<200>	Outage Reporting (voice)		(complete attached work	ksheet)		_ /
<210>	✓ check box if no	outages to report		Г		IIIII
<300>	Unfulfilled Service Requests (voice)					
<210×	Detail on Attempts (voice)					TITLE
<310>	betail of Attempts (voice)			1 '		
				(attach descriptive docu	ument)	
<320>	Unfulfilled Service Requests (broadband)					IIIII
		**		7 .		THE PARTY
<330>	Detail on Attempts (broadband)			(attach descriptive do		
<400>	Number of Complaints per 1,000 customers (voice)					
<410>	Fixed 0.0	\neg				1
<420>	Mobile 0.0					
	Number of Complaints per 1,000 customers (broadb	and)				HILL
<440> <450>	Fixed Mobile					
	Service Quality Standards & Consumer Protection Ru	les Compliance	(check to indicate certifi	ication)		1
	399021sd510.pdf					
<510>			(attached descriptive	document)		1
<600>	Functionality in Emergency Situations		(check to indicate certifi	antian!		1
1000 2	399021sd610.pdf		(check to indicate certification)	cationy		
			(attached descriptive doc	ument)		1
-610>			John St.			
<610>						****
	Company Price Offerings (voice)		(complete attached work	isheet)		
	Company Price Offerings (broadband)		(complete attached work			111115
	Operating Companies and Affiliates Tribal Land Offerings (Y/N)?		(complete attached work (if yes, complete attached work			THE STATE
	Voice Services Rate Comparability		(check to indicate certific			Tillii
				_	-10.11	
<1010>			(attach descriptive docu	ment)		шш
<1100>	Terrestrial Backhaul (Y/N)?		(if not, check to indicate certifi	cation)		THE STATE OF
<1110>			(complete attached work	(sheet)	8	WILL
	Terms and Condition for Lifeline Customers		(complete attached work	0.	WIIII	/
F	Price Cap Carriers, Proceed to Price Cap Additional De					
2000>	Including Rate-of-Return Carriers affiliated with Price	Cap Local Excha	nge Carriers (check to indicate certific	otion) [15	THE PARTY
2005>			(complete attached works			iiiiii
	tate of Return Carriers, Proceed to ROR Additional D	ocumentation W	orksheet	-	THE .	****
3000>			(check to indicate certificate)			
3005>			Icomplete attached works	maatt.	I Bo	

100) Se	rvice Quality Improvement Reporting		FCC Form 481
ata Co	llection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	399021	
<015>	Study Area Name	Budget PrePay Inc.	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com	
<110>	Has your company received its ETC certification from the FCC?	(yes / no) O O	
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes/no) O O	
	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.		
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your CETC which only receives frozen support, your progress report is only	company is a	
	required to address voice telephony service.		
	Please check these boxes below to confirm that the attached documents(s), on I 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	ine	Name of Attached Document
	Maps detailing progress towards meeting plan targets		
<113>			
<113> <114>	Report how much universal service (USF) support was received		
<114>	Report how much universal service (USF) support was received How (USF) was used to improve service quality		
<114> <115>	TO SET DE BESTON AND AND AND AND AND AND AND AND AND AN		
	How (USF) was used to improve service quality		

(200) Service Outage Reporting (Voice)	
Data Collection Form	

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	399021
<015>	Study Area Name	Budget PrePay Inc.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com

3	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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Data Coll	e Offerings including Voice Rate Data ection Form	50 10 10 10 10 10 10 10 10 10 10 10 10 10	o. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area Code	399021	
<015>	Study Area Name	Budget PrePay Inc.	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com	
<701>	Residential Local Service Charge Effective Date 1/1/2014		
<702>	Single State-wide Residential Local Service Charge		

<703>

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
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[710] Broadband Price Offerings		FCC Form 481
Data Collection Form	9	OMB Control No. 3050-0986/OMB Control No. 3060-0819
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* -	July 2013

<010>	Study Area Code	399021
<015>	Study Area Name	Budget PrePay Inc.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com

State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
	·	m					-	-
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	+							
	+							

(800) Operating Companies FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code		399021
<015>	Study Area Name		Budget PrePay Inc.
<020>	Program Year		2015
<030>	Contact Name - Person	USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Nun	nber - Number of person identified in data line <030>	3186715000 ext.
<039>	Contact Email Address	Email Address of person identified in data line <030>	lakishat@budgetprepay.com
<810>	Reporting Carrier	Budget PrePay, Inc. d/b/a Budget Mobile	
<811>	Holding Company	N/A	
<812>	Operating Company	N/A	

Affiliates	SAC	Doing Business As Company or Brand Designation
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:010>	Study Area Code	399021
015>	Study Area Name	Budget PrePay Inc.
:020>	Program Year	2015
030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
:035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.
:039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com
020-	Tribal Government Engagement Obligation	
920>	1	and the second s

demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes: <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions. <922> Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; <923> Compliance with Rights of way processes <924> <925> Compliance with Land Use permitting requirements <926> Compliance with Facilities Siting rules <927> Compliance with Environmental Review processes <928> Compliance with Cultural Preservation review processes

<929> Compliance with Tribal Business and Licensing requirements.



and the second second second second	Terrestrial Backhaul Reporting ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	399021
<015>	Study Area Name	Budget PrePay Inc.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

Lifeline ,	rms and Condition for Lifeline Customers ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	399021
<015>	Study Area Name	Budget PrePay Inc.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Name of Attached Document
		Name of Attached Document
<1220>	Link to Public Website HTTP	oudgetmobile.com
"Please c	heck these boxes below to confirm that the attached document(s), on line 1210,	
or the we	bsite listed, on line 1220, contains the required information pursuant to	
§ 54.422	(a)(2) annual reporting for ETCs receiving low-income support, carriers must	
annually	report:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll calls, and rates for each such plan.	

ata Colle	ce Cap Carrier Additional Documentation ction Form Rate-of-Return Carriers offiliated with Price Cap Local Exchange Carriers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3050-0819 July 2013
<010>	Study Area Code	399021	
<015>	Study Area Name	Budget PrePay Inc.	
<020>	Program Year	2015	
	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com	
<2010> <2011>	support as set forth in 47 CFR § 54.313(b),(c),(d),(d),(d),(d),(d),(d),(d),(d),(d),(d	e) the information reported on this form and in th	e documents attached below is accurate.
<2012> <2013> <2014> <2015>	Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)} 2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification		
<2016>	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband		
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached document(s), on pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II suppor addresses of community anchor institutions to which began providing calendar year.	line 2021, contains the required information t shall provide the number, names, and ing access to broadband service in the	
<2021>	Interim Progress Community Anchor Institutions	Name of A	

<010>	Study Area Code	399021
	Study Area Name	Budget PrePay Inc.
-	Program Year	2015
	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	3186715000 ext.
	e boxes below to note compliance on its five year service quality plan (pursuar	lakishat⊗budgetprepav.com nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in
	CFR § 54.313(f)(2). I further certify that the	he information reported on this form and in the documents attached below is accurate.
2010)	Progress Report on 5 Year Plan	
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i))	
	2	Name of Attached Document Listing Required information
	Dispes short this how to confirm that the attached day months as lies	
3011)	Please check this box to confirm that the attached document(s), on line \$ \$4.313 (f)(1)(ii), the carrier shall provide the number, names, and addroroviding access to broadband service in the preceding calendar year.	
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	
		Name of Attached Document Listing Required Information
	is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) if yes, does your company file the RUS annual report	(Yes/No) (Yes/No)
Please	check these boxes to confirm that the attached document(s), on line 301	7, contains the required information pursuant to § 54.313(f)(2) compliance requires:
	Electronic copy of their annual RUS reports (Operating Report for	
(3016)	Telecommunications Borrowers) Document(s) for Balance Sheet, Income Statement and Statement of Ca	ash Flows
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	
		Name of Attached Document Listing Required Information
(3018)	If the response is no on line 3014, Is your company audited?	(Yes/No)
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	
(3019)	Either a copy of their audited financial statement; or (2) a financial report $$ In a	format comparable to RUS Operating Report for Telecommunications
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of C	Cash Flows
(3021)	Management letter issued by the independent certified public accountant that	t performed the company's financial audit.
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	_
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,	
(3023)	Underlying information subjected to a review by an independent certified public accountant	
(3024) (3025)	Underlying information subjected to an officer certification. Document(s) for Balance Sheet, Income Statement and Statement of C	Cash Flows
(annua)	bounterings) to balance street, income statement and statement of	Joseph Flows
(3026)	Attach the worksheet listing required information	

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
A CONTRACTOR OF THE CONTRACTOR	July 2013

<010>	Study Area Code	399021
<015>	Study Area Name	Budget PrePay Inc.
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<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Title or position of Authorized Officer: Title or position of Authorized Officer: Study Area Code of Reporting Carrier: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	399021
<015>	Study Area Name	Budget PrePay Inc.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) <u>David Donahue</u> also certify that I am an officer of the reporting carrier; my responsibil agent; and, to the best of my knowledge, the reports and data provide	is authorized to submit the information reported on behalf of the reporting carr ties include ensuring the accuracy of the annual data reporting requirements provided to the authorized to the authorized agent is accurate.
Name of Authorized Agent: David Donahue	
Name of Reporting Carrier: Budget PrePay Inc.	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/26/2014
Printed name of Authorized Officer: David Donahue	
Title or position of Authorized Officer: CFO	
Telephone number of Authorized Officer: 3186715000 ext.	
Study Area Code of Reporting Carrier: 399021	Filing Due Date for this form: 07/01/2014

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Re	Recipients on Behalf of Reportin	g Carrier
as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service so the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the inf	어린 하다 하는 것이 없는 사람이 아름이 되었다고 있었다. 이 없는 것이 없는 것이 없다고 있다고 있다면 하다면 없었다.	
Name of Reporting Carrier: Budget PrePay Inc.	A	
ame of Authorized Agent or Employee of Agent: David Donahue		
ignature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/26/2014
rinted name of Authorized Agent or Employee of Agent: David Donahue		
itle or position of Authorized Agent or Employee of Agent CFO		
elephone number of Authorized Agent or Employee of Agent: 3186715000 ext.		
tudy Area Code of Reporting Carrier: 399021 Filing Due Date for this form: 0	07/01/2014	

Attachments

Budget PrePay, Inc.

<u>Line 510 – Compliance with Service Quality Standards and</u> Consumer Protection

Budget PrePay, Inc. ("Budget") hereby certifies that it has reviewed and complies with applicable service quality and consumer protection practices, and that it is in compliance with all applicable state requirements in connection with its provision of wireline (if applicable) and wireless voice services. Among other things, Budget:

- Complies with the service standards promulgated by the State of Arkansas.
- · Discloses rates and terms of its voice services to customers.
- Provides current terms and conditions to customers and confirms changes in voice service.
- Separately identifies carrier charges from taxes on billing statements and purchase receipts.
- Provides ready access to customer service.
- Promptly responds to consumer inquiries and complaints received from federal and state government agencies.
- Abides by CPNI rules and other rules for the protection of consumer privacy.
- Makes available maps showing the local calling area on point of sale materials and website.
- Provides specific disclosures in advertising if applicable.
- Provides customers the right to terminate voice service

Line 610 - Functionality in Emergency Situations

Section 54.202(a)(2) of the Commission's Rules requires that each eligible telecommunications carrier ("ETC") must "[d]emonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations." Section 54.313(a)(6) requires ETCs to certify that they are "able to function in emergency situations as set forth in §54.202(a)(2)" in connection with their provision of voice and broadband services.

Budget PrePay, Inc. d/b/a Budget Phone and d/b/a Budget Mobile has deployed [resells the services of underlying carriers that have deployed] sufficient power generators to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.

Budget PrePay Inc. has geographically located its switching infrastructure. All facilities are equipped with both AC and DC battery backup as well as generators. All critical equipment is also supplied with 2 separate power sources (or primary and redundant power feeds).

Budget PrePay maintains multiple paths to reach our network. This is setup by using multiple IP transit providers for all IP connectivity and an N+1 configuration on all TDM connectivity.

Once the origination traffic reaches the Budget PrePay network all elements are setup with the same N+1 configuration. The configuration allows each element a primary and redundant path to terminate the traffic without service interruption. In the event the main element fails or that

^{1 47} C.F.R. § 54.202(a).

² 47 C.F.R. § 54.313(a)(6).

element reaches maximum capacity Budget has designed the network to advance the traffic to 1 of 3 other elements in the same N+1 configuration that is listed above.

The switching infrastructure will advance to the next termination carrier in route in the event of a failure on any termination carrier's route.